

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|---------|---------|
| FEE DETERMINATION | D.B. | 20215 | 1-13-99 |
| O.I.P.E. CLASSIFIER | | 69300 5 | 1-15-99 |
| FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | 5 | 11 |
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Best Available Copy